

DECLARATION FOR PATENT APPLICATION

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

acknowledge the duty to disclose information which is material to the examination of this application in accordar litle 37, Code of Federal Regulations, §1.56(a). Thereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for priventor's certificate listed below and have also identified below any foreign application for patent or inventor's caving a filing date before that of the application on which priority is claimed: Priority claimed Priority Priori	was filed onas			LANCING DEVICE			
was filed on	was filed on	he specification of which	า				
Application Serial No. and was amended on (if applicable) hereby state that I have reviewed and understand the contents of the above identified specification, including the samended by any amendment referred to above. acknowledge the duty to disclose information which is material to the examination of this application in accordar litle 37, Code of Federal Regulations, §1.56(a). hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for powentor's certificate listed below and have also identified below any foreign application for patent or inventor's calcaining a filling date before that of the application on which priority is claimed: Priority Claimed (Number) (Country) (Day/Month/Year Filed) Yes (Number) (Country) (Day/Month/Year Filed) Yes (Number) (Country) (Country) (Day/Month/Year Filed) Yes	Application Serial No	(check one)	XX	is attached hereto.			
increby state that I have reviewed and understand the contents of the above identified specification, including the samended by any amendment referred to above. acknowledge the duty to disclose information which is material to the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). Increby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for poventor's certificate listed below and have also identified below any foreign application for patent or inventor's ceaving a filing date before that of the application on which priority is claimed: Priority claimed Priority (Number) (Country) (Day/Month/Year Filed) Yes (Country) (Day/Month/Year Filed) Yes (Country) (Day/Month/Year Filed) Yes (Country) (Cou	(if applicable) Thereby state that I have reviewed and understand the contents of the above identified specification, including the samended by any amendment referred to above. The acknowledge the duty to disclose information which is material to the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). Thereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's ceraving a filing date before that of the application on which priority is claimed: The accordance of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). The accordance of the examination of the examination of this application of the examination of the exami			was filed on	as		
(if applicable) Thereby state that I have reviewed and understand the contents of the above identified specification, including the samended by any amendment referred to above. The acknowledge the duty to disclose information which is material to the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). Thereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for powentor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any foreign application for patent or inventor's certified below any	rereby state that I have reviewed and understand the contents of the above identified specification, including the anamended by any amendment referred to above. The acknowledge the duty to disclose information which is material to the examination of this application in accordance to the 37, Code of Federal Regulations, §1.56(a). The reby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for payontor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate listed before that of the application on which priority is claimed: The results of the above identified below any foreign application on which priority is claimed: The results of the application on which priority is claimed: The results of the above identified below any foreign applicati			and was amended on			
acknowledge the duty to disclose information which is material to the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). Thereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for proventor's certificate listed below and have also identified below any foreign application for patent or inventor's ceaving a filing date before that of the application on which priority is claimed: Thereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for proventor's certificate listed below and have also identified below any foreign application for patent or inventor's ceaving a filing date before that of the application on which priority is claimed: Priority Claimed (Number) (Country) (Day/Month/Year Filed) Yes in the company of the provisional application of the application of the application on which priority is claimed: (Number) (Country) (Day/Month/Year Filed) Yes in the provisional application of the application of the application on which priority is claimed: (Number) (Country) (Day/Month/Year Filed) Yes in the provisional application of the applic	acknowledge the duty to disclose information which is material to the examination of this application in accordance to 37, Code of Federal Regulations, §1.56(a). Thereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for parameters certificate listed below and have also identified below any foreign application for patent or inventor's certaining a filing date before that of the application on which priority is claimed: Priority claimed Priority claimed Priority			and was amonded on	(if applicable)		
tle 37, Code of Federal Regulations, §1.56(a). Increby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for powentor's certificate listed below and have also identified below any foreign application for patent or inventor's certaining a filing date before that of the application on which priority is claimed: Priority Claimed Priority Claimed Priority Priority	tle 37, Code of Federal Regulations, §1.56(a). Interest of the applications, §1.56(a). Interest of the applications of the application on which priority is claimed: Interest of the application on which priority is				of the above identified specification	on, including	the cla
ventor's certificate listed below and have also identified below any foreign application for patent or inventor's certain a filing date before that of the application on which priority is claimed: Priority Claimed (Number) (Country) (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed) (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes	ventor's certificate listed below and have also identified below any foreign application for patent or inventor's ceraving a filing date before that of the application on which priority is claimed: Priority Claimed (Number) (Country) (Country) (Day/Month/Year Filed) (Number) (Number) (Country) (Country) (Day/Month/Year Filed) (Country) (Day/Month/Year Filed) Yes N (Country) (Day/Month/Year Filed) Yes N (Number) (Day/Month/Year Filed) Yes N (Number) (Country) (Country) (Day/Month/Year Filed) Yes N (Day/Month/Year Filed) Yes N (Day/Month/Year Filed) Yes N (Day/Month/Year Filed) October 15, 2002				to the examination of this applica	ation in accor	dance
Claimed (Number) (Country) (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed)	Claimed (Number) (Country) (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed) (Country) (C	ventor's certificate listed	d below and ha	ave also identified below	any foreign application for patent		
(Number) (Country) (Day/Month/Year Filed) Yes (Number) (Country) (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Number) (Country) (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed)	(Number) (Country) (Day/Month/Year Filed) Yes N nereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applicated below.		s and or and ap	plication on which phonty	is claimed:		
(Number) (Country) (Day/Month/Year Filed) Yes (Number) (Country) (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed) Yes (Day/Month/Year Filed)	(Number) (Country) (Day/Month/Year Filed) Yes N (Number) (Country) (Day/Month/Year Filed) Yes N thereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applicate sted below. October 15, 2002			pheation on which phonty	is claimed:		
(Number) (Country) (Day/Month/Year Filed) Yes (Number) (Country) (Day/Month/Year Filed) Yes (Day/Month	(Number) (Country) (Day/Month/Year Filed) Yes N (Number) (Country) (Day/Month/Year Filed) Yes N hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applicated below. October 15, 2002	ior Foreign Application(Cla im □	ned
(Number) (Country) (Day/Month/Year Filed) Yes Inhereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applications.	(Number) (Country) (Day/Month/Year Filed) Yes N thereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applicate steed below. October 15, 2002	rior Foreign Application(Cla im □	ned
(Number) (Country) (Day/Month/Year Filed) Yes Intereby claim the benefit under Title 35, United States Code §1-19(e) of any United States provisional applications.	(Number) (Country) (Day/Month/Year Filed) Yes Numbereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applicated below. October 15, 2002	ior Foreign Application((Country)	(Day/Month/Year Filed)	Claim U Yes	ned
nereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applica	nereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional applicat ted below. October 15, 2002	ior Foreign Application((Country)	(Day/Month/Year Filed)	Claim Yes	ned D No
	60/418,422	rior Foreign Application((Number) (Number)		(Country)	(Day/Month/Year Filed) (Day/Month/Year Filed)	Claim Yes Yes	No No
	60/418,422 October 15, 2002 (Application Number) (Filing Date)	(Number)		(Country)	(Day/Month/Year Filed) (Day/Month/Year Filed)	Claim Yes Yes	No No
60/418-422	(Application Number) (Filing Date)	(Number) (Number) (Number)	(s)	(Country) (Country)	(Day/Month/Year Filed) (Day/Month/Year Filed) (Day/Month/Year Filed)	Claim Yes Yes Yes	No No No
(Application Number) (Filing Date)		(Number) (Number) (Number) (Number) hereby claim the benefited below.	(s)	(Country) (Country) (Country) 35, United States Code	(Day/Month/Year Filed) (Day/Month/Year Filed) (Day/Month/Year Filed) §119(e) of any United_States_pro	Claim Yes Yes Yes	ned No No No
(Application Number) (Filing Date)	<u> </u>	(Number) (Number) (Number) nereby claim the benefited below. 60/418,422 (Application Number)	it under Title 3	(Country) (Country) (Country) 35, United States Code Octob	(Day/Month/Year Filed) (Day/Month/Year Filed) (Day/Month/Year Filed) §119(e) of any United_States_proper 15, 2002 te)	Claim Yes Yes Yes	No No No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose

(Application Serial No.) (Filing Date) (Status: patented, pending, abandoned) (Application Serial No.) (Filing Date) (Status: patented, pending, abandoned) I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Jerome L. Jeffers, Reg. No. 25,080 Andrew L. Klawitter, Reg. No. 26,557 John M. Paolino, Reg. No. 36,340 Address all telephone calls to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers, Esq., Bayer Healthcare LLC, P. O. Box 40, Elkhart, IN 46515-0040 USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made or information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 or the United States Code and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. Full name of sole or first inventor Inventor's signature Residence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Oate) Norman S. MILLER Norman 47905 USA (Cale) 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Little Address 4300 West Stadium Avenue, West Lafayette, Indiana 47906 USA	(Application Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Jerome L. Jeffers, Reg. No. 25,080 Andrew L. Klawitter, Reg. No. 26,557 John M. Paolino, Reg. No. 40,340 Elizabeth A. Levy, Reg. No. 33,848 Andrews all telephone calls to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers, Esq., Bayer Healthcare LLC, P. O. Box 40, Elkhart, IN 46515-0040 USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and belief are believed to be true; and further that these statements were made with the knowledge that willfalse statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. Full name of sole or first inventor Inventor's signature Residence The bollestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America NORMAN S. MILLER NORMAN S. MILLER Inventor's signature Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA United States of America	(Application Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)
Patent and Trademark Office connected therewith: Jerome L. Jeffers, Reg. No. 25,080 Andrew L. Klawitter, Reg. No. 26,557 John M. Paolino, Reg. No. 40,340 Address all telephone calls to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers, Esq., Bayer Healthcare LLC, P. O. Box 40, Elkhart, IN 46515-0040 USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and belief are believed to be true; and further that these statements were made with the knowledge that willfalse statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. Full name of sole or first inventor ROBERT C. WHITSON Inventor's signature Residence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America NORMAN S. MILLER Inventor's signature Residence 1300 Vest Stadium Avenue, West Lafayette, Indiana 47906 USA United States of America United States of America Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA	(Application Serial No.)	(Filing Date)	(Status: patented, pending, abandoned)
Andrew L. Klawitter, Reg. No. 26,557 John M. Paolino; Reg. No. 40,340 Address all telephone calls to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers at telephone number 574/264-8394. Address all correspondence to: Jerome L. Jeffers, Esq., Bayer Healthcare LLC, P. O. Box 40, Elkhart, IN 46515-0040 USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willfalse statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pater ssued thereon. Full name of sole or first inventor Inventor's signature Sesidence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America NORMAN S. MILLER			te this application and to transact all business in the
Address all correspondence to: Jerome L. Jeffers, Esq., Bayer Healthcare LLC, P. O. Box 40, Elkhart, IN 46515-0040 USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. Full name of sole or first inventor Residence S4152 Pebblestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America Full name of second joint inventor, if any NORMAN S. MILLER NORMAN S. MILLER NORMAN S. MILLER Inventor's signature Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America	Andrew L. Kl	awitter, Reg. No. 26,557 Patrick J. Igo	pe, Reg. No. 35,202
hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pater is sued thereon. Full name of sole or first inventor ROBERT C. WHITSON Inventor's signature Residence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America NORMAN S. MILLER Inventor's signature Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America	Address all telephone	calls to: <u>Jerome L. Jeffers</u> at telephone numbe	r <u>574/264-8394</u> .
I hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and belief are believed to be true; and further that these statements were made with the knowledge that willing false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. Full name of sole or first inventor ROBERT C. WHITSON Inventor's signature Secretary Code Residence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Full name of second joint inventor, if any NORMAN S. MILLER Inventor's signature Residence 1300 West Stadium Aprile, West Lafayette, Indiana 47906 USA Citizenship United States of America Norman S. Miller Inventor's signature Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America			IN 46515-0040 USA
Residence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America Post Office Address 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Full name of second joint inventor, if any NORMAN S. MILLER Eventor's signature NORMAN S. MILLER Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America	nformation and belie alse statements and he United States Co	fare believed to be true; and further that these se the like so made are punishable by fine or imp	tatements were made with the knowledge that willful isonment, or both, under Section 1001 of Title 18 of
Residence 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Citizenship United States of America Post Office Address 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Full name of second joint inventor, if any NORMAN S. MILLER Enventor's signature NORMAN S. MILLER Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America	Full name of sole or f	rst inventorROBERT	C. WHITSON
Citizenship United States of America Post Office Address 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Full name of second joint inventor, if any NORMAN S. MILLER Inventor's signature Sound Family DR APT 805 Langette, Indiana 47905 USA (Date) Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America	nventor's signature _	Robert C. 1	vhisen 11-6-03
Citizenship United States of America Post Office Address 54152 Pebblestone Lane, Elkhart, Indiana 46514 USA Full name of second joint inventor, if any NORMAN S. MILLER nventor's signature NORMAN S. MILLER ### NORMAN S. MILLER #### NORMAN S. MILLER ##################################	Residence	54152 Pebblestone Lane, Elkhart, 1	ndiana 46514 USA
nventor's signature Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA United States of America	Citizenship		
Residence United States of America Inventor's signature	ost Office Address _	54152 Pebblestone Lane, Elkhart, 1	ndiana 46514 USA
rventor's signature Source	Full name of second	oint inventor, if anyNORMAN	S. MILLER
Residence 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA Citizenship United States of America Post Office Address 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA	nventor's signature _	Morm Stelle	//-23-03
Citizenship United States of America Post Office Address 1300 West Stadium Avenue, West Lafayette, Indiana 47906 USA	Residence	1300 West Stadium Avenue, West La	fayette, Indiana 47906 USA
Post Office Address L300_West_Stadium_Avenue, West_Lafavette, Indiana 47906_HSA		United States of America	
800 Timber Trail DR Apt 805 Lasayette, Indiana 47905 USA	Post Office Address		2
		- NSM @ 11-23-03	

material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date

JLJ52003 MSE #2671